



# HOOSIER HEALTHWISE BRIEFING

## Hoosier Healthwise 2002 Primary Medical Provider Satisfaction Survey

### Objective

A Hoosier Healthwise satisfaction survey is conducted annually to assess the attitudes, behaviors and perceptions of the Hoosier Healthwise program by the participating primary medical providers (PMPs).

### Method

This research is based upon a mail survey conducted among all PMPs participating in the Hoosier Healthwise program for all regions and health plan networks during calendar year 2001. Questionnaires were completed by PMPs, office managers and other office staff. From a total of 2,097 questionnaires distributed, 763 completed questionnaires were returned to an independent market research organization, Market Measurement, for data analysis. This translates to a response rate of 36 percent.

A technique called "data weighting" was used to ensure that the total/aggregate study findings accurately reflect the true size of the populations of PMPs for each region/network combination. Comparisons were made with the results of earlier PMP Satisfaction Surveys.

### Summary of Key Findings

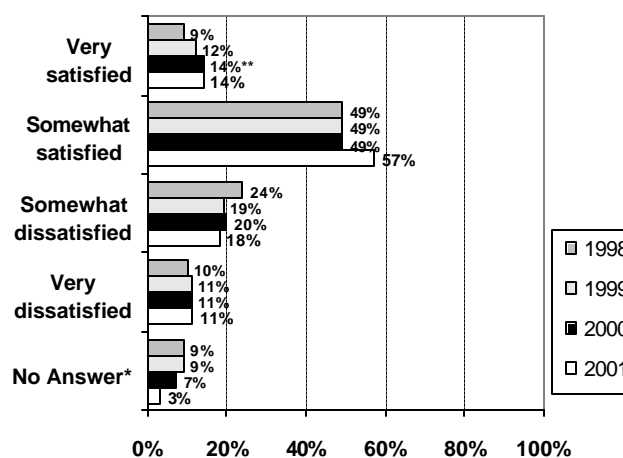
#### 1. PMP satisfaction ratings have steadily improved.

- 71 percent of the PMPs were very or somewhat satisfied with Hoosier Healthwise. This represents significant improvement since the program was first implemented (see Table 1).

#### 2. PMP satisfaction rarely differs by:

- practice type;
  - family practitioners,
  - pediatricians,
  - general internists.
  - OB-GYNs, or
  - general practitioners.
- geographic location, or
- network through which care is provided to Hoosier Healthwise members.
- In 2001, sole practitioners had a slightly higher satisfaction level than the group practitioners.

TABLE 1  
LEVEL OF SATISFACTION WITH  
HOOSIER HEALTHWISE PROGRAM  
(2001 Total Sample = 763)



\* Includes "not sure" responses and no answer.

\*\* Significantly above 1998 and all prior years.

### 3. Favorable ratings for Hoosier Healthwise for 10 out of 12 criteria.

Well over half of all PMPs provide at least a "1," "2" or "3" rating (1=excellent and 5=poor) for the Hoosier Healthwise Program when considering the following evaluation criteria:

• Ease of enrolling, as a PMP in your network (94%)	• Timeliness of claims processing (87%)
• Indiana Health Coverage Program Provider Updates (93%)	• Accuracy of responses to your questions/concerns (82%)
• Ease of verifying patient eligibility (90%)	• Authorization process for patients to access care from another provider (82%)
• Communicating your responsibilities to you as a PMP (90%)	• Hoosier Healthwise patients, in terms of following physician instructions (59%)
• Communication from your network (87%)	• Hoosier Healthwise patients, on keeping appointments (52%)

### 4. Key opportunities for improvement (i.e., low ratings of "4" or "5" where 1=excellent and 5=poor) for 2 out of 12 criteria.

- Autoassignment process (55%) [This was also the most popular issue identified in the "fill-in-the-blank" question (which 20% mentioned) at the end of the questionnaire asking PMPs about "problems or concerns" they have with the Hoosier Healthwise Program.]
- Reimbursement Rates (51%)

### 5. Most PMPs are satisfied with Hoosier Healthwise "patient load" (see Table 2).

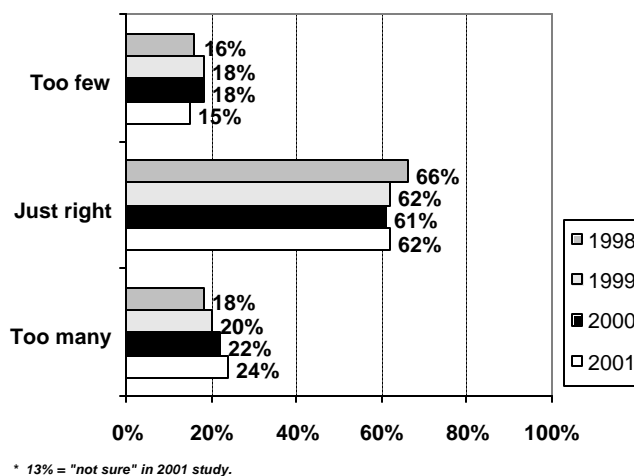
### 6. Improvements in keeping patients.

In 1999-2001, the proportion of PMPs describing "losing patients you previously served" as a "major problem" declined from almost one in five (19%) to only ten percent (10%).

### 7. Opportunity for improvement on relating information to the primary care physician on their patients receiving behavioral health treatment.

Only one in seven primary care physicians provided an "excellent" (3%) or "very good" (13%) rating for receiving medical information on their patients from behavioral health specialists.

**TABLE 2**  
**SENTIMENT TOWARD**  
**HOOSIER HEALTHWISE PATIENT LOAD**  
(Among Those Providing A Rating = 660 in 2001)



**8. Positive attributes of the Hoosier Healthwise program, from a PMP perspective, are heavily focused upon providing access to medical care for lower income patients.**

Among the PMPs providing a “write-in” response to the open-ended question asking about the “positive aspects” of the Hoosier Healthwise program, approx. one quarter (24%) specifically focused upon the value of this program in providing access to medical care to those who could not otherwise afford these services.

**10. Hoosier Healthwise program concerns, from a PMP perspective**

Among the PMPs providing a write-in response to the open-ended question at the end of the questionnaire, focusing on “problems or concerns” PMPs have with the Hoosier Healthwise Program, 26% criticized reimbursement (i.e., typically “too low”), 20% were dissatisfied with the auto-assignment process and 19% of physicians were dissatisfied with the lack of adequate patient education on emergency room use, referrals, accessing care when needed, benefits, processes/rules, patient responsibilities, etc.

**11. Increasing impact of PrimeStep (PCCM) on Hoosier Healthwise program.**

Although likely to correspond with the known evolution of the Hoosier Healthwise Program, the proportion of PMPs “most familiar” with PrimeStep (PCCM) has decreased to 43%, which indicated that more physicians have chosen or transitioned into a managed care organization. In terms of the actual networks through which those participating in this study provide care, PrimeStep (PCCM) continues to have the highest percentage of awareness, but the managed care organizations are gaining visibility in 2001. Managed Health Services (MHS) has a statistically higher percentage of familiarity (28%) than from the 2000 survey (22%). Harmony Health Plan of Indiana and MDwise had no prior visibility with the primary care physicians surveyed, since both plans are new Hoosier Healthwise network contracts that began January 2001. However, 9% of physicians reported awareness of Harmony Health Plan of Indiana and 19% with MDwise.

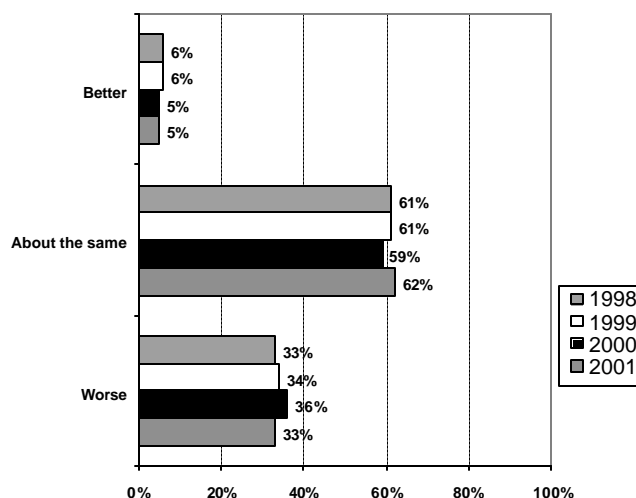
In summary, with the exception of the auto-assignment process, PMPs are comparatively more likely to be critical of their patient/physician relationships, than their interactions with the Hoosier Healthwise program. This was also evident in the 1998 assessment and might also explain concerns many PMPs have about their Hoosier Healthwise member patient/physician relationships (e.g., 33% suggest that these patient/physician relationships are “worse” than those characterizing their commercial insurance patients -- see Table 3).

In response to these findings, work plans will be developed by the managed care entities and OMPP for program improvements.

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**TABLE 3**  
**HOOSIER HEALTHWISE PATIENT/PHYSICIAN**  
**RELATIONSHIP**  
**COMPARED TO COMMERCIAL INSURANCE**  
**PATIENTS**  
(Among Those Providing A Rating = 716)\*



\* 4% = "not sure" in 2001 study.